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ABSTRACT

Eight exemplary programs for preventing alcohol and other drug abuse are presented in this document. These programs are summarized: (1) SUPER II Early Intervention Program, Atlanta, Georgia, which serves primarily inner-city youth ages 11-17 and their families through community agencies, juvenile courts, alternative schools, and public housing; (2) NaKeiki O Ka'Aina ("Children of the Land"), Wai'anae, Hawaii, in which children from a rural Hawaiian community work on a farm; (3) Native Hawaiian Substance Abuse Prevention Project, Honolulu, Hawaii, which builds on a foundation of preventive and socialized techniques based on Native Hawaiian values, practices, and culture; (4) School of Opportunities, Kokomo, Indiana, an alternative education program for youth in high-risk environments in grades 6-12; (5) Children's after School Achievement Program, Holland, Michigan, which serves the needs of more than 100 disadvantaged, minority students in grades 1-8; (6) Solid Ground Program, Carson City, Nevada, which encourages juvenile probationers to get involved in positive experiences; (7) Teen Outreach Program (TOP), Bridgeton, New Jersey, which recruits and trains peer educators from a high-risk adolescent population; and (8) Center for Indian Youth Program Development, Albuquerque, New Mexico, which provides alcohol and other drug prevention services to culturally diverse children, youth, and their families in rural New Mexico. (ABL)

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PREVENTION IN ACTION

**1991 EXEMPLARY ALCOHOL
AND OTHER DRUG
PREVENTION PROGRAMS**

**U.S. DEPARTMENT OF
HEALTH AND HUMAN SERVICES
Public Health Services
Alcohol, Drug Abuse,
Mental Health Administration
Office for Substance Abuse Prevention
in cooperation with the
National Association of State Alcohol
and Drug Abuse Directors and
the National Prevention Network**

1991 EXEMPLARY PROGRAMS FOR PREVENTING ALCOHOL AND OTHER DRUG ABUSE

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The University of New Mexico's Center for Indian Youth Development provides alcohol and other drug prevention services to culturally diverse children, youths, and their families in rural New Mexico communities. They are designed in partnership with American Indian communities through school-based Teen Center programs that offer a comprehensive approach to adolescent health concerns.

INTRODUCTION

There can be no "one-size fits all" prevention program or strategy. Prevention activities must be consistent with the priorities, values, world view, and ways of communicating that exist in each community.

-Citizen's Alcohol and Other Drug Prevention Directory

The origins of alcohol and other drug abuse are complex and deeply embedded in our culture, our social structure, and our economic systems. Cultural norms and values, national policies, State and local laws, law enforcement practices, school policies, the behavior of parents, and the beliefs and attitudes of individuals may contribute to alcohol and other drug problems. Effective prevention approaches address these complex factors.

Research confirms that alcohol and other drug abuse prevention strategies help individuals to develop and maintain healthy lifestyles, behaviors, and attitudes. These same strategies can help individuals improve their self-perceptions by teaching them that they are competent, that they are an important part of something larger than themselves, and that their actions affect the direction and events of their lives. Prevention strategies can assist individuals in living personally satisfying and enriching lives as they constructively confront complex, stressful life situations.

Because the creation and maintenance of an alcohol- and other drug-free society are crucial to the health and well-being of all Americans, the Office for Substance Abuse Prevention (OSAP), the National Association of State Alcohol and Drug Abuse Directors (NASADAD), and its affiliate--The National Prevention Network (NPN)--present the 1991 Exemplary Programs. They are showcased here to provide the public with models that can be replicated or adapted in communities across America.

The goals of the Exemplary Programs Study are twofold. First, the study provides models of state-of-the-art alcohol and other drug abuse prevention programs that may be replicated or adapted by others. Second, national attention is focused on exemplary alcohol and other drug abuse prevention efforts. All alcohol and other drug abuse prevention programs are nominated for recognition by a State alcohol and drug agency or through selected national organizations.

The 1991 Exemplary Programs illustrate a wide variety of approaches that are effective in diverse communities because no single approach will be effective in every area. They demonstrate that prevention can be best achieved through multiple strategies that address the unique characteristics, cultural diversity, and structure of each community in the Nation. These programs offer strategies designed for prevention practitioners, individuals interested in becoming involved in the field, and public policymakers at the community, State, and national levels.

Communities have the unique opportunity to involve individuals as agents of social change, thus forming a strong base of support for new standards that not only prevent alcohol and other drug abuse, but also build a climate of health and positive growth. Through broad participation and motivation, communities have the power to collectively create an alcohol- and other drug-free society. The 1991 Exemplary Programs reflect practical plans of action that are yielding encouraging results in the ongoing effort to eradicate the use and abuse of alcohol and other drugs.

Recognizing excellence in prevention programming is traced back to annual meetings of State prevention coordinators during the late seventies and early eighties. Throughout the period of 1983-85, a committee of the NPN drafted a procedure for identifying and selecting outstanding programs. In 1986, the process was further refined by the addition of criteria by which to rate the programs. The procedure included a call for nominations that went out to local programs through the States and through the national organizations that were represented on the NPN committee. In 1987, the first Exemplary Programs were recognized at a special ceremony at the Department of Health and Human Services in Washington, DC. The second set of Exemplary Programs was recognized in 1989 at the Second Annual NPN Prevention Research Conference in Indianapolis, Indiana. The third set of Exemplary Programs was recognized in 1990 at a ceremony on Capitol Hill.

During the early part of 1991, the national nomination process was again used to identify effective alcohol and other drug abuse prevention programs. The program nominations were reviewed and rated at home by nearly 50 professionals who were selected for their expertise in the field of prevention and other related areas of activity. Reviewers included representatives of alcohol and other drug abuse agencies, national organizations, and previous exemplary program winners.

The at home reviewers rated the applications by identifying major strengths and weaknesses, giving an overall summary of each program's characteristics, and rating the applications on a 10-point scale in the following categories:

- Philosophy
- Background and need (program planning)
- Goals and objectives
- Evaluation
- Marketing and promotion
- Target population(s)
- Activities and strategies
- Community coordination
- Replicability
- Program management

State agency personnel and national organizations submitting nominations reviewed the information contained in each application and certified its accuracy. Another group of reviewers, comprising the 17-member review committee, met in Washington, DC, in September to identify the 1991 Exemplary Programs. Those programs are arranged in alphabetical order by State and appear on pages 4 through 20 in this document.

It should be noted that the General Accounting Office (GAO), the investigative arm of Congress charged with, among other things, auditing and evaluating government programs, did just that with the exemplary programs in the Departments of Health and Human Services (HHS) and Education. Although the GAO's draft report arrived too late for the HHS exemplary programs study to benefit fully from the GAO recommendations, some of them have been implemented. They include:

- To make the nominating process more systematic and comprehensive, invitations to participate in the 1991 Exemplary Programs Study went to all nominating agencies and all national organizations described in OSAP's "Citizen's Alcohol and Other Drug Prevention Directory. In addition, announcement of the nomination process was sent to previous exemplary program winners, OSAP Learning Community Conference attendees, the RADAR Network, OSAP High Risk Youth and Pregnant and Post Partum Women and Their Infants grantees, and numerous national publications.
- Revision of the criteria upon which programs are judged. The categories (listed above at the bottom of the last page) remained unchanged, but with the assistance of an evaluation expert, each category was broken down into key components to provide clarification and consistency in interpretation.
- Evidence of a program's effectiveness was sought from the top 50 percent of the programs as identified by the initial round of reviewers. Almost all of those programs were able to supplement their original applications with such evidence, and this material was available for evaluation by the final review committee when it met in Washington, DC.

SUPER II EARLY INTERVENTION PROGRAM

SUPER II serves primarily inner city, African-American, high-risk youth (as well as other ethnic groups) aged 11-17 and their families and is provided through community agencies, juvenile courts, alternative schools, and public housing. Session design and implementation emphasize holism and cultural competence, seeing them as crucial in reducing the strength of risk factors and increasing the strength of resiliency factors.

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Clientele

African-American (and other ethnicities as well), high-risk youth served by various community agencies, such as the Boys and Girls Clubs of Metropolitan Atlanta, living in public housing communities, having court involvement, or attending an alternative school. The young people are selected because of their early involvement with alcohol and other drugs (AOD) and because of the existence of other risk factors such as being children of AOD abusers, economically disadvantaged, and, in some cases, exhibiting delinquent behavior.

Major Services

Using a holistic approach as its rationale for program design and implementation, the Metropolitan Atlanta Council on Alcohol and Drugs (MACAD) produced SUPER II (Substance Use Prevention and Education Resource/Expanded Version). SUPER II is based on SUPER I, which provides an alternative for students who had broken school rules by using, possessing, or distributing AOD.

Now 4 years old, SUPER II consists of 7 core sessions and 2 booster or followup sessions, each 2 hours in length. SUPER II is provided through strong linkages with community agencies, public housing communities, juvenile courts, alternative schools, and mental health centers, receiving extensive staff support from them as well as donated space in which to hold the program.

Some highlights of the SUPER II program follow:

- Family sessions include parents or parent substitutes, along with the adolescents, all in the same room. Family communication skills are stressed.
- Parenting sessions include only the parents or parent substitutes, thus allowing parents more freedom to talk about their own or their spouse's AOD use.
- Peer sessions meet at the same time the parents meet and are led by Peer Leaders. This setting is designed to create an atmosphere for youths where they feel free to discuss issues.
- Booster sessions are held to reinforce preventive impact of the above-described family, parenting, and peer sessions.

The SUPER II program has developed an additional service for families with special needs through a Family Services Coordinator. This coordinator provides assistance with accessing educational, family and children, medical, school guidance, Food Stamp, AOD, and juvenile court and probation department services. The coordinator then monitors the degree of satisfaction with the services provided.

The SUPER II program receives funding from the Office for Substance Abuse Prevention and support from Georgia's Department of Human Resources, and the City of Atlanta. In addition, other groups have provided attendance incentives, such as refreshments, to the youth and their parents.

NA KEIKI O KA 'AINA ("CHILDREN OF THE LAND")

Located in a rural Hawaiian community on the Island of O'ahu, all students from Makaha Elementary School work on a farm where they learn to care for the land, their environment, and themselves as alternatives to lifestyles that rely on alcohol and other drugs

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Clientele

Children attending Makaha Elementary School, grades K-6. The ethnic breakdown is 47 percent Native Hawaiian, 14 percent Filipino, 12 percent White, and 27 percent divided among 11 other groups.

Major Services

Using the cultural values of Native Hawaiians, the program promotes a healthy, alcohol- and other drug-free community that finds strength in those values and practices.

A major component of the program is Hoa 'Aina, a nearby community farm. Hoa 'Aina provided space to the program, which was originally developed for emotionally handicapped children from the Makaha School. The successes of the programs for these children and for AOD-abusing adolescents eventually led to including all Makaha children in the program.

Five classes of science students go to Hoa 'Aina every day; during the course of the week, each of the 800 students will work on that farm. The students learn to care for the land, their environment, and themselves through planting crops and raising animals and fish.

Other highlights of Na Keiki O Ka 'Aina include:

- Classroom activities that stress literacy skills through the use of essays and poetry about tasks performed at the farm.
- Experiential "hands on" activities and related classroom studies that coordinate classroom work with farm work.
- Curriculum that uses cultural values of "warm open friendship and love," love of the earth, and other spiritual values.
- Understanding the value in their homes and community of shared work and collaborative learning.
- A nutrition education program developed by the school cafeteria manager, using ingredients from the farm in the school menu.

Funding for this program comes from the Wai'anae Coast Community Mental Health Center, Makaha Elementary School, Hoa 'Aina, and other local groups.

NATIVE HAWAIIAN SUBSTANCE ABUSE PREVENTION PROJECT

This model of alcohol and other drug abuse prevention for offenders, ex-offenders, and their loved ones is built on the foundation of preventive and socialized techniques based on Hawaiian values, practices, and culture.

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Clientele

Native Hawaiian offenders, ex-offenders, and their significant others. Native Hawaiians have a disproportionately high rate of incarceration, comprising 12 percent of the State's population but comprising 47 percent of the incarcerated population. The Native Hawaiian inmate population accounts for 22 percent of alcohol and other drug (AOD) abuse arrests, and it is estimated that 65 percent of the Native Hawaiians re-arrested are AOD-related. The high percentage of Native Hawaiians in the State's penal system prompted the ALU LIKE agency to

begin providing counseling and job placement service to inmates within the prison and after their release on parole.

Major Services

While Native Hawaiians have major health, educational, and economic problems, standard methods of addressing these problems have not been successful, so addressing them through the use of traditional cultural values is the focus of this project.

The project is staffed by five KUPUNA outreach facilitators. The KUPUNA is traditionally the grandparent generation, or elders, whose knowledge of traditional preventive and healing practices was learned from their ancestors. Services and assistance are provided in ways that are culturally appropriate and consistent with the traditional healing practices of LOKAHI (harmony and balance with nature and the creative forces) and HO'OPONOPONO (setting things right).

It is in this context that the "no use" message is reinforced, and the perception of alcohol and other drug abuse as an introduced dysfunction and not part of Native Hawaiian culture. Some conventional methods are of necessity used, such as required documentation of intake, assessment, intervention, evaluations, and tracking of the client for a period after parole or release.

Some of the project's activities are listed below.

- The KUPUNA and the client set their own pace and come together whenever they agree is right for as long as they choose.
- The meetings can be held anywhere, not necessarily in the project office. They take place in restaurants, parks, homes, or in the prison or half-way house.
- When the initial meeting with the KAPUNA has been completed, most of the clients attend followup "talk story" sessions.
- Hawaiian history sessions are held to fill a gap in the persons' knowledge of their history. They learn to appreciate the wisdom and greatness of their forebears.
- A separate project of ALU LIKE works with unemployed ex-offenders in job counseling, overcoming employment barriers, pre-employment workshops, and job or educational placement.

To the surprise of the project staff, some non-Hawaiian clients have asked for meetings with the KAPUNA, and they are not turned away.

Funding for this project comes from Federal funds granted to Hawaii under the Alcohol, Drug

SCHOOL OF OPPORTUNITIES I AND II

This alternative education program for youths in high-risk environments, in grades 6-12, is designed to decrease the dropout rate caused by alcohol and other drug (AOD) problems, improve attendance, and reduce AOD use by coordinating family, school, and community involvement.

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Clientele

High-risk students in grades 6-12 in Kokomo High School's School of Opportunities who have been identified through testing, referral, and interviews. Factors determining the selection include a high absenteeism and tardiness rate, alcohol and other drugs used in the home or by the student, child abuse in the home, alienation from the routine of regular

school through pregnancy or other causes, and demonstrated frustration with meeting the demands of regular school by chronic failure and anti-social behavior.

The students are 87 percent White, 12 percent Black, and less than 1 percent Hispanic and Asian or Pacific Islander. Almost 14 percent come from low-income families in Kokomo where the economy is depressed.

Major Services

Focusing on positive lifestyle choices for students, many of whom have been suspended or removed from traditional schools because of alcohol and other drug (AOD) problems, SCOOPS reaches 96 students each year with an efficient and effective AOD prevention program. The program coordinates family, school, and community participation by strategies such as:

- Promoting family involvement through Kokomo's Excellence in Education with Parents as Partners tutor-mentoring, QUEST parent workshops;, Wildkat Boosters Club anti-AOD social activities, Latch Key program, parenting skills training, and other activities. Parents of students with AOD problems are required to go through counselling with their child before being readmitted to school.
- Including drug education activities in schools designed by the Drug and Alcohol Prevention Coordinator. Classes in transactional analysis, peer facilitation, health curriculum, crisis management, AOD prevention, and other topics are held in the schools.
- Integrating health promotion and disease prevention by promoting partnerships with other agencies. These agencies have consistent messages that help to build a supportive community environment for healthy lifestyles, behaviors, and attitudes.

By the time the students left the program, 30 percent qualified for the regular Kokomo High School honor roll, overall grades improved 30 percent from entrance in the program, reported AOD offenses decreased 80 percent, 25 percent mainstreamed, annual average attendance was up almost 93 percent, recidivism dropped 95 percent in SCOOPS I (grades 6-9) and 80 percent in SCOOPS II (grades 10-12), 100 percent of the parents participated in scheduled parent meetings, and almost all of the students had no Juvenile Justice contact.

SCOOPS has been featured on television, radio, and in the news media.

Funding from SCOOPS comes from the Job Training Partnership Act, the Indiana Division of Addiction Services, "At Risk," Drug Free Schools, the Kokomo Police Department, and the Kokomo-Center Schools.

CHILDREN'S AFTER SCHOOL ACHIEVEMENT PROGRAM

This program serves the needs of more than 100 disadvantaged, at-risk Hispanic and other at-risk minority students in grades 1-8 by providing tutoring, culturally enriching field trips, and other prevention-related activities.

Agency

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Clientele

More than 100 disadvantaged, at-risk, Hispanic and other minority students in grades 1-8 from seven schools in the Holland, Michigan, school district.

Major Services

Extreme discrepancies exist between the educational attainment of Hispanics compared to non-Hispanic White students in the area; their school dropout rate is three to four times higher, and in at least one school, 55 percent higher.

The 2-year-old Children's After School Achievement (CASA) Program located at Hope College is designed to develop the skills and motivation necessary to enable the students to successfully complete high school and establish an alcohol- and other drug-free lifestyle. Major components of the program are:

- Certified teachers and Hope College students provide individualized tutoring twice a week in CASA's Academic Year Program. Students also go on educational and culturally enriching field trips and receive information on topics such as career exploration, interpersonal skills, dropout prevention, teen pregnancy, AIDS, peer pressure, study skills, and resistance skills to avoid alcohol and other drug use.
- Students in grades 6-8 spend one week each summer on the Western Michigan University Campus and tour the college, learn about appropriate classes for college-bound students and credits needed, and enjoy the companionship of other success-oriented minority students.
- Students in grades K-5 attend a 6-week summer day school with high quality instruction in mathematics, science, reading, writing, art, physical education, health, and English as a Second Language. All students participate in specially designed alcohol and other drug abuse prevention and self-esteem-building activities.
- The CASA Program has a close relationship with Hope College's Upward Bound Program, which provides the CASA Program with peer tutors and mentors who can receive instructions in their native language.
- The target schools are supportive of the CASA Program, and provide textbooks, supplies, and the use of school facilities to the Program. Counselors, teachers, and other school personnel actively recruit for the CASA Program and provide constant feedback on the progress of CASA's current programs.

The CASA Program receives funding from a community development grant, Hope College, the United Way, and a Hispanics in Journalism grant.

SOLID GROUND

A creation of the Young Volunteers of Nevada, the Solid Ground program encourages juvenile probationers to get involved in positive experiences that will expand their personal goals and skills. The program is offered in lieu of traditional community service tasks.

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Clientele

Juvenile offenders on probation, aged 12-18, who have been involved with alcohol or other drugs in the Carson City, Lyon County, and Douglas County Juvenile Probation Departments. Their ethnic composition is 85 percent White, 5 percent Hispanic, and 10 percent "other," including Native American.

Major Services

Solid Ground, now in its second year of operation, works with three juvenile probation departments and the Carson City School District in an attempt to get the juvenile probationers involved in positive experiences instead of risking incarceration later. These experiences include exposing them to new activities and friends and expanding their personal vocational goals and skills. Solid Ground enjoys significant community involvement at all levels.

To achieve its goals of helping youthful offenders at risk for serious problems with alcohol and other drugs, the Solid Ground program encourages the development of meaningful vocational goals and necessary skills to locate and keep employment. Juvenile probation officers refer offenders to participate in the Solid Ground program. Instead of the traditional 48 hours of work assignments--such as picking up trash along the highway--the participants perform the following activities:

- Prepare an interest and aptitude inventory in class and go through a personal interview where cultural/ethnic, or handicapping conditions are identified and addressed. For example, a Spanish translation of a 20-hour pre-vocational class is available for Solid Ground participants having trouble with English courses.
- Successfully complete in class a resume, job application form, a videotaped role play of an interview, and a 2-hour Stress Management and Impulse Control seminar.
- Perform 25 hours of volunteer work at a site that complements the results of those inventories. More than 100 nonprofit businesses, State and local government agencies, and volunteer organizations have been involved in these work experiences, and more and more employers continue to volunteer to work with these young people.

Two local high schools offer Solid Ground participants half of a full school credit if they continue their volunteer work and complete 90 hours; 180 hours brings 1 full credit.

By October 1990, of the 82 young people who successfully completed the program, 59 were continuing to volunteer or are still involved with other Young Volunteers of Nevada activities.

Solid Ground's funding comes from Nevada's Bureau of Alcohol and Drug Abuse with Drug-Free Schools money.

TEEN OUTREACH PROGRAM

The Teen Outreach Program (TOP) recruits and trains peer educators from a high-risk adolescent population in a rural southern New Jersey county. Through teen life theater, peer educators deliver alcohol and other drug information and teach coping skills by portraying daily life situations.

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Clientele

At-risk teens and pre-teens, aged 11-19, in rural, economically depressed Cumberland County. Their ethnic composition is approximately 50 percent White, 30 percent Black, 18 percent Hispanic, and 2 percent Native American or Asian.

The Teen Outreach Program (TOP) recruits and trains 12 peer educators from the high-risk target population, with about half of these peer educators being outstanding students who serve as excellent role models for the high-risk adolescents.

Major Services

After 25 years of extensive work with teens in the reproductive health care area, staff of Family Planning Services of Cumberland, Gloucester, and Salem Counties were convinced of the need for a primary alcohol and other drug prevention program designed for teens. With its myriad special problems, such as a high teen unemployment rate, high number of domestic violence offenses, and high teenage birth rate, the area's teens were at greater risk for alcohol and other drug use. Before the initiation of the Teen Outreach Program no prevention programs existed.

Now beginning its fourth year of operation, TOP's services include:

- Education sessions to 2,000 unduplicated teens and pre-teens, 500 unduplicated parents, and 200 unduplicated professional community members. These services are provided through the peer educators, known as the TOP Team.
- Teen life theater. TOP Team members portray daily living situations and the skills required to handle them. Provision is made for audience response and discussion. Topics include alcohol and other drug prevention, addictions, AIDS, peer pressure, and healthy decisionmaking.
- Public speaking. Public speaking sessions to pre-adolescents and adolescents deal with subjects chosen and researched by the youths with the aid of a program coordinator, a public speaking consultant, and others. Topics include general alcohol and drug information, children of alcoholics, fetal alcohol syndrome, marijuana, and AIDS.
- Consultation sessions of community education to local groups and professionals involved with at-risk adolescents.
- Networking efforts with outside agencies such as Federal, State, and county entities to exchange alcohol and other drug information.
- A program newsletter, published quarterly and distributed to 150 agencies and individuals to keep the community aware of TOP's activities.

The Teen Outreach Program is funded by the New Jersey Department of Health, Division of Narcotics, and private donors.

CENTER FOR INDIAN YOUTH PROGRAM DEVELOPMENT

The University of New Mexico's Center for Indian Youth Program Development provides alcohol and other drug prevention services to culturally diverse children, youths, and their families in rural New Mexico communities. They are designed in partnership with American Indian communities through school-based Teen Center programs that offer a comprehensive approach to adolescent health concerns.

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Clientele

Children who are enrolled in Headstart, grades K-6, junior and senior high school, and their parents. They are primarily American Indians but also include Hispanics, Anglos, and individuals of mixed ancestry who live in geographically isolated communities of rural New Mexico where prevention efforts are largely nonexistent.

In any one school year the Center for Indian Youth Program Development (CIYPD) reaches 85 percent of the students it serves. It sees 800 students a month through classroom alcohol and other drug abuse prevention activities, 1,800 students a year through Teen Center visits, and 675 students through club activities.

Major Services

More than other Americans, American Indian children and adults bear the burden from such alcohol- and other drug abuse-related problems as school failure, antisocial behavior, unemployment, criminal arrest, and increased sickness and death. In fact, the mortality rate from alcohol abuse for 15 to 24-year-old American Indians in New Mexico is 50 times higher than the Anglo rate. And 40 percent of New Mexico Indians have incomes below the Federal poverty level.

For these reasons, the children and youths require comprehensive alcohol and other drug abuse programs designed to enrich adolescent life in general. The CIYPD responds to community requests for assistance by providing alternatives to alcohol and other drug abuse during school hours, after school, on weekends, and throughout the summer.

The program includes:

- Alcohol and other drug abuse prevention services provided at school-located Teen Centers. Activities are carried out by American Indian prevention coordinators who live on the reservations they serve and who use materials and videotapes that are culturally specific. The practice of traditional activities is encouraged and supported, stemming from the belief that "Indians who have meaningful roles in both traditional and modern society have the lowest susceptibility to alcohol and other drug abuse."
- In-service training for teachers and other professionals on topics including alcohol and other drug abuse.
- Training activities, such as parenting skills, coping with alcohol in the family, setting limits, understanding child development, communication, and social influences.
- Preparation of brochures and videotapes for national distribution, such as:
 - David's Song: American Indian Teens and AIDS
 - What Happened to Mike: Indian Youth and Suicide
 - Youth's Views on Alcoholism and the Family
 - What Will Jerry Do? American Indian Youth and Inhalant Abuse

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